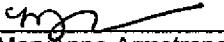


<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 3749-0112PUS1																																											
Application No. 10/577,008-Conf. #7226	Filing Date August 7, 2006	Examiner O. N. Chernyshev	Art Unit 1649																																												
Applicant(s): Toshiharu Suzuki et al.																																															
Invention: MARKER PEPTIDE FOR ALZHEIMER'S DISEASE																																															
<b>MS Amendment</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1"> <thead> <tr> <th colspan="6"><b>CLAIMS AS AMENDED</b></th> </tr> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td><b>Total Claims</b></td> <td>12</td> <td>- 20 =</td> <td>0</td> <td>x 50.00</td> <td>0.00</td> </tr> <tr> <td><b>Independent Claims</b></td> <td>1</td> <td>- 3 =</td> <td>0</td> <td>x 210.00</td> <td>0.00</td> </tr> <tr> <td colspan="5"><b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5"><b>Other fee (please specify):</b></td> <td></td> </tr> <tr> <td colspan="5"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b></td> <td>0.00</td> </tr> </tbody> </table>						<b>CLAIMS AS AMENDED</b>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		<b>Total Claims</b>	12	- 20 =	0	x 50.00	0.00	<b>Independent Claims</b>	1	- 3 =	0	x 210.00	0.00	<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>						<b>Other fee (please specify):</b>						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
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<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00																																										
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																												
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
<u>OCT 07 2008</u> Dated: _____																																															
 MaryAnne Armstrong Attorney Reg. No. 40,069																																															
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																															